

20f2

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)							SERIAL NO. 1 10-546132	FILING DATE					
CLAIMS													
	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT			AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
101		2					51						
102		2					52						
103		2					53						
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140							90						
141							91						
142							92						
143							93						
144							94						
145							95						
146							96						
147							97						
148							98						
149							99						
150							100						
TOTAL IND.	12		10				TOTAL IND.						
TOTAL DEP.	234		10				TOTAL DEP.						
TOTAL CLAIMS	246		20				TOTAL CLAIMS						

L. Daniel